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ABSTRACT

The Reciprocity Family Counseling Method involves learning principles of behavior modification including selective reinforcement, behavioral contracting, self-correction, and over-correction. Selective reinforcement refers to the recognition and modification of parent/child responses and reinforcers. Parents and children are asked to identify behaviors which are positive or problematic, with the objective being to modify specific behaviors. Behavioral contracting is the writing of agreements concerning modifications of negative behavior to positive behavior. Self-correction involves the misbehaving individual correcting his own behavior. Over-correction is behavior change with behavior directed toward restoring lost trust and hurt feelings. Sessions last 90 minutes once a week for 4 weeks with follow-ups at 30, 90, and 180 days. Measurement instruments used are the Family Problem Checklist and the Satisfaction Scale, each with forms for parents and children. The Family Problem Checklist includes sections on communication, friends and activities, chores, school, appearance, money, curfew, and conduct and privileges. The Satisfaction Scale rates satisfaction with communication, friends and activities, curfew, privileges, home conduct and rules, home and recreational privileges, health and appearance, money, household chores, school, happiness, following agreements, discussing assigned areas, and making new agreements. The instruments are included. (ABL)

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# RECIPROCITY FAMILY COUNSELING: A MULTI-ETHNIC MODEL

By

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The purpose of this paper is to explain the components *and* usefulness of the Reciprocity Family Counseling Model. As a result, the following areas will be covered: a) The Basic Structure; b) Session-Content Analysis; c) Measurement Instruments; d) The Case Summary; and e) Usefulness with Diverse Populations. This information is basic to understanding the dynamics of this counseling approach. However, this must be coupled with practice if the counselor is to become proficient.

## THE BASIC STRUCTURE

The Reciprocity Method used here has been adopted from Nathan H. Azrin [Azrin, N.H., et al. (1980) Comparison of Reciprocity and Discussion-Type Counseling for Marital Problems. American Journal of Family Therapy, 8 (4), 21-28; Besalel, V.A. and Azrin, N.H. (1981) The Reduction of Parent-Youth Problems by Reciprocity Counseling. Behavioral Research and Therapy, 19 (4), 297-301; and Azrin, N.H. et al. (1973) Reciprocity Counseling: A Rapid Learning Based Procedure for Marital Counseling. Behavioral Research and Therapy, 11, 365-382]. This method involves learning principles of behavior modification: selective reinforcement, behavioral contracting, self-correction and over-correction. The counseling program, designed by Azrin, is brief and well planned.

*Selective Reinforcement:* This is the recognition and modification of parent/child responses and reinforcers. This is accomplished by having the parent(s) and child(ren) mutually identify specific behaviors which are seen as positive and/or problematic. The objective is to selectively and intentionally modify (eliminate/reduce or initiate/improve) specific behaviors.

*Behavioral Contracting:* This is the writing and sighing of agreements regarding the modifications to be made in their own behavior. An important part of this contract is that all parties involved must agree as to the positivism of the target behavior.

*Self-Correction:* This is a strategy for self-initiated behavior change. If a child or parent were to misbehave or exhibit an undesirable behavior, then the erring individual(s) is to correct it with a mutually perceived positive behavior. This method is important in teaching the individual responsibility for social behavior.

*Over-Correction:* This is another strategy for self-initiated behavior change. This is used with severe or continuous behaviors. The erring individual is taught that compensation is not enough, but that additional behavior must be directed at restoring lost trust and hurt feelings. By using this strategy the individual should become aware of the feelings and rights of other people.

The Reciprocity Counseling Model is ideal because of its structure and brevity. The program is designed to involve four sessions and three follow ups. Each session lasts 90 minutes and is offered once a week for four weeks. The three follow-ups are made at 30-day, 90-day, and 180-day increments: all measured from the final session. This is useful as an in-office, one family-one counselor approach.

SESSION-CONTENT ANALYSIS

It should be noted, early, that this strategy seems to be *most* effective when the counselor takes a directive and confrontive role. This

involves controlling the flow of each session. The next important topic is that of content session. Each session will be discussed as a separate sitting. However, take notice of the continuity from one session to the next.

*Session One:* During this session, the counselor has each parent and child make a list of all the positive things that happened during the preceding week. Specifically, the parent lists "What my child did/does for me" and "What I did/do for my child". The child/teen lists "What my parent did/does for me" and "What I did/do for my parent". Each should have listed, at least, five items. The parent(s) and child(ren) take turns reading the items from their list. After reading an item the others should be encouraged to respond by acknowledgement and expressed appreciation at which time the one presenting is encouraged to verbally and/or non-verbally reciprocate. Briefly, after each of the participants have shared, members should discuss how it felt to have their actions acknowledged by members of the family. The counselor discusses the importance of having each person identify *positive changes* which are considered, by the entire family, to be desirable. During this session, the participants complete the appropriate forms fo the Family Problem Checklist and Satisfaction Scale.

*Session Two:* As in the first session, the participants make lists of positive things from the preceding week. This time the counselor draws out experiences related to 1) Communication; 2) Friends and ACtivities; 3) Home Rules and Privileges; 4) Curfew; 5) Appearance; 6) Money; 7) Chores; and 8) School. Family members alternate in sharing, being acknowledged and by reciprocating. The early stages of the "Behavioral Contract" are

initiated: participants identify desirable, self-initiated behaviors. Family members make mutually acceptable reciprocal agreements.

*Session Three:* As in the previous session, each member lists and shares positive experiences from the preceding week. The focus of this session is accountability for self-initiated reciprocal agreements. Various strategies are shared which can maximize the acting out of self-initiated Reciprocal Agreements. These, "Selective Reinforcers", include 1) Offering to help; 2) Pleasant surprises; 3) happy talk; and 4) positive practice. It is important that participants learn to not blame others for their own failure to satisfy the pre-arranged agreements. Instead of blaming others, participants learn to blame the situation, oneself, or future events.

*Session Four:* The focus of this session is on closure. Two key strategies to be learned are "self-correction" and over-correction". The purpose of these strategies is to compensate and rectify failure to comply with the self-initiated behavioral contract. In addition, participants learn positive communication skills, useful in negotiating new behavioral agreements. These skills include giving compliments, words of appreciation, appreciation reminders, and positive request procedures. Finally, the family discusses their feelings about the validity of Reciprocity Family Counseling *and* are instructed to complete the Family Problem Checklist and Satisfaction Scale.

*Follow-Ups:* There are *three* follow-ups conducted by the counselor. These are conducted at 30 days, 90 days, and 180 days after the fourth counseling session. At each follow-up, the participants complete the Family Problem Checklist and Satisfaction Scale. Also the counselor monitors the adherence and/or maintenance of the behavioral contract. At this time, it

may be necessary for the counselor to help the family members reexamine the terms and specifics of their self-initiated behavioral contract.

**MEASUREMENT INSTRUMENTS**

There are two instruments used with Reciprocity Family Counseling. There are, however, two forms of each instruments. The instruments are the Family Problem Checklist [Form: Parent, Child/Teen] and the Satisfaction Scale [Form: Parent, Child/Teen]. These instruments are *not* standardized; these are the work of N.H. Azrin, based upon common family problems presented by parent and child/teen clients. In addition to these instrument, I have developed a profile sheet for mapping out the *frequency* of problems. Copies of the forms are found in Appendix A.

*Family Problem Checklist:* The Family Problem Checklist is a list of up to 119 problems covering up to eight areas. These areas include: 1) COMMUNICATION; 2) FRIENDS and ACTIVITIES; 3) CHORES; 4) SCHOOL; 5) APPEARANCE; 6) MONEY; 7) CURFEW; AND 8) CONDUCT and PRIVILEGES. There are two forms of this checklist, the "Parent" *and* "Child/Teen" forms. The "Parent" form includes all eight categories and all 119 items. The "Child/Teen" form *does not* have the school category and only 106 items.

> The COMMUNICATION section is a list of 14 problems which involve attention giving, verbal/non-verbal respect, tone of voice, inappropriate use of words and other forms of expression. There is also, following the 14 items, an inventory of perceived severity; the participant rates the overall severity section on a scale from "0" [No Problem] to "5" [Very Severe Problem].

The FRIENDS and ACTIVITIES section is a list of 20 problems which include inability to make friends, refusal to share, inappropriate use of home for entertaining, interpersonal relationships, and confrontation with authority. There is also, following the 20 items, an inventory of perceived severity; the participant rates the overall severity section on a scale from "0" [No Problem] to "5" [Very Severe Problem].

The CHORES section is a list of 11 problems which relate to the fulfillment of domestic responsibilities. There is also, following the 11 items, an inventory of perceived severity; the participant rates the overall severity section on a scale from "0" [No Problem] to "5" [Very Severe Problem].

The SCHOOL section is a list of 13 problems which include performance, avoidance behavior, home study habits, and inappropriate behavior at school. There is also, following the 13 items, an inventory of perceived severity; the participant rates the overall severity section on a scale from "0" [No Problem] to "5" [Very Severe Problem].

The APPEARANCE section is a list of 11 problems which reflect cleanliness, personal hygiene, and fashionableness. There is also, following the 11 items, an inventory of perceived severity; the participant rates the overall severity section on a scale from "0" [No Problem] to "5" [Very Severe Problem].

The MONEY section is a list of 10 problems which include the spending, earning, saving and misuse of money. There is also,

following the 10 an inventory of perceived severity; the participant rates the overall severity section on a scale from "0" [No Problem] to "5" [Very Severe Problem].

The CURFEW section is a list of 6 problems which involve lateness and elective absenteeism. There is also, following the 6 items, an inventory of perceived severity; the participant rates the overall severity section on a scale from "0" [No Problem] to "5" [Very Severe Problem].

The CONDUCT AND PRIVILEGES section is a list of 34 problems which involve disobedience, aggressiveness, laziness, sloppiness, deceit, and boisterousness. There is also, following the 34 items, an inventory of perceived severity; the participant rates the overall severity section on a scale from "0" [No Problem] to "5" [Very Severe Problem].

*Satisfaction Scale:* There are two forms of this instrument; the *Parent* and the *Child/Teen* forms. The information gathered is the same for both, the differences are semantical. Statements with variance are 1) "How happy am I today with how my (child/teen *or* parent) is behaving in this area"; and 2) "Overall happiness with (child/teen *or* parent)". The purpose of this instrument is to survey the participants perceived satisfaction in a variety of areas. Each participant rates on a scale, from "0" [Completely Happy] to "5" [Completely Unhappy], satisfaction with each of the fourteen areas. The areas are COMMUNICATION, FRIENDS and ACTIVITIES, CURFEW PRIVILEGES, HOME CONDUCT and RULES, HOME and RECREATIONAL PRIVILEGES, HEALTH and APPEARANCE, MONEY, HOUSEHOLD CHORES, SCHOOL, OTHER, OVERALL

HAPPINESS, FOLLOWING AGREEMENTS, DISCUSSED ASSIGNED AREAS, and MADE NEW AGREEMENTS. This instrument is intended to provide a survey of perceived satisfaction as well as providing a paired rating for the Inventory of Perceived Severity in the appropriate sections of the Family Problem Checklist.

*Complaint List Profile:* This form, which is filled out by the Counselor, is used with both the Parent and the Child/Teen participants. The value is that it provides a visual illustration of problem frequency. There are two sides of this form. Side One, the COMPLAINT LIST PROFILE, contains the following information: 1) Name of participant; 2) Encounter number; 3) Raw score; 4) Inventory; and 5) Plotting diagram. The NAME of participant is the name of the person who filled out the Family Problem Checklist. The ENCOUNTER NUMBER is equal to the number of completed Family Problem Checklists. The RAW SCORE is the total number of items checked in the corresponding sections of the Family Problem Checklist; Raw Score - COM is total number of items checked in the Communication section. The INVENTORY is the number between "0" and "5" checked in the "Inventory of Perceived Satisfaction" of the corresponding section in the Family Problem Checklist. The PLOTTING DIAGRAM is used to map out the percentage of items checked in each of the eight sections; 1) COM - Communication; 2) F/A - Friends and Activities; 3) CHO - Chores; 4) SCH - School; 5) APP - Appearance; 6) MON - Money; 7) CUR - Curfew; and 8) CON - Conduct and Privileges. Side Two, the FAMILY PROBLEM CHECKLIST CUMULATIVE PERCENTAGE TABLE, is the computed cumulative frequency for each of the eight sections. Additional information is given so that the overall percentage of checked problems can be calculated.

**THE CASE SUMMARY**

A unique feature of this strategy is that it includes a simple-to-write and easy-to-understand report or case summary. The purpose of the summary is to document the participants involvement and provide a link between the counselor *and* referring agency. The RECIPROCITY COUNSELING CASE SUMMARY outline and succeeding CASE SUMMARY sample, found in Appendix B, provide valuable examples of how a report can be constructed. The following information is included in the CASE SUMMARY: 1) Subject's Name: 2) Counselor; 3) Referred By; 4) Date(s) of Counseling; 5) Date of Report; 6) Reason for Referral; 7) General Observations; 8) Evaluation; 9) Summary; and 10) Recommendations. After the CASE SUMMARY, the Counselor should also write supplements which correspond to the 30-day, 90-day, and 180-day follow-ups. The following is a brief description of the former. The Subject's Name is synonymous with the name of the participant. The Counselor is the individual who conducted each of the four sessions. Referred By is the name of the individual, agency, or source responsible for initiating the counseling. The Date(s) of Counseling are the dates which the participant(s) attended counseling; there can be as few as one or as many as four. The Date of the Report is the date on which the report was typed; not written. The Reason for Referral are those extenuating circumstances which led the participant to be referred by an individual, agency or other identified source. General Observations are those subjective impressions which the Counselor observed and perceives to be significant. The Evaluation is a specific appraisal of the participants' involvement and successes/failures measured throughout the course of counseling and the follow-up period. The Summary is an encapsulation of everything previously covered. The Recommendations are those specific

suggestions which serve to provide additional direction in the case planning of the participant(s).

## USEFULNESS WITH DIVERSE POPULATIONS

The question, at this point, is what group of people would this approach be useful with. Hopefully, this method is useful with all ethnic families. The initial assumption is that all families "in crisis" and in need of counseling are experiencing intrafamilial problems which can be identified as related to Communication, Friends and Activities, Chores, School, Appearance, Money, Curfew, and/or Conduct and Privileges. The weak link is that it may be argued that various ethnic groups may define problems differently. This is compensated for in that the problems are broad and open to the participants perception. This being so, the aim of counseling is twofold. First, as a result of counseling, the participant MUST perceive that he/she has reduced/eliminated some problem(s) which were initially identified; hopefully these problems will not reappear and the success will be maintained even up to 180-days following counseling. Second, it is important that the participant be able to manipulate the environment; the strategies must be generalizable to situations outside of counseling.

In conclusion, the test for this model is whether or not it is useful in various multi-ethnic situations. Certainly, because of its brevity, structure and positive outlook on problem reduction it boasts great potential for poor, urban people. The fact that the measurement items are simple, demonstrate the potential for language translation. In total, the assumption is that if a particular approach or strategy is not culturally biased, then it must be culturally impartial. The Reciprocity Family

Counseling described here can be reproduced with the greatest degree of effectiveness, given motivated counselors, and the least amount of operating costs. These factors alone are efficacious. The potential is unlimited, the testing ground is among the people who have rejected traditional psychotherapy because help seemed hopeless and out of reach. This method boasts that problems will be reduced within a defined period of time. Counseling puts hope within the reach of the participant.

# APPENDIX A

NAME_____

DATE_____

## PARENT SATISFACTION SCALE

**Estimate your current happiness in each of the areas listed. Ask yourself the question, "How happy am I today with how my child/teen is behaving in this area?" Circle 0 if you are completely happy and see no need for improvement; circle 5 if you are completely unhappy. Numbers in between show more or less need for improvement to make you completely happy.**

| | Completely Happy | Very Happy | A little Happy | A little Unhappy | Very Unhappy | Completely Unhappy |
|---|---|---|---|---|---|---|
| COMMUNICATION | 0 | 1 | 2 | 3 | 4 | 5 |
| FRIENDS & ACTIVITIES | 0 | 1 | 2 | 3 | 4 | 5 |
| CURFEW PRIVILEGES | 0 | 1 | 2 | 3 | 4 | 5 |
| HOME CONDUCT & RULES | 0 | 1 | 2 | 3 | 4 | 5 |
| HOME & RECREATIONAL PRIVILEGES | 0 | 1 | 2 | 3 | 4 | 5 |
| HEALTH & APPEARANCE | 0 | 1 | 2 | 3 | 4 | 5 |
| MONEY | 0 | 1 | 2 | 3 | 4 | 5 |
| HOUSEHOLD CHORES | 0 | 1 | 2 | 3 | 4 | 5 |
| SCHOOL | 0 | 1 | 2 | 3 | 4 | 5 |
| OTHER | 0 | 1 | 2 | 3 | 4 | 5 |
| OVERALL HAPPINESS WITH CHILD/TEEN | 0 | 1 | 2 | 3 | 4 | 5 |

IGNORE THE REST IF YOU ARE FILLING THIS FOR THE FIRST TIME

| | | | | | | |
|---|---|---|---|---|---|---|
| Following Agreements | 0 | 1 | 2 | 3 | 4 | 5 |
| Discussed Assigned Areas | 0 | 1 | 2 | 3 | 4 | 5 |
| Made New Agreements | 0 | 1 | 2 | 3 | 4 | 5 |

Check if contract was read to each other and and reviewed: _____.

## FAMILY (PARENT) PROBLEM CHECKLIST

List the major problem(s) you have with your child/teen at home:

List the major problem(s) that your child/teen has with friends and activities:

List the major problem(s) your child/teen has at school:

Does your child/teen make you feel guilty or upset about anything in particular?

Circle the numbers in front of those problems which you have with your child/teen, and would like to change.

COMMUNICATION:

1. He/she never greets me or pays attention to me when I am speaking, he/she ignores me.
2. He/she does not listen to me.
3. He/she is disrespectful.
4. He/she criticizes me or disagrees with me about everything.
5. He/she talks back or is angry a lot.
6. He/she yells.
7. He/she swears or uses shocking language.
8. He/she lies or cannot be trusted.
9. He/she nags or asks me things at the last minute.
10. He/she blames others or tattles.
11. He/she does not discuss problems, accept help, love or praise.
12. He/she cries too much.
13. He/she makes me feel guilty.
14. Other communication problems.

Regarding COMMUNICATION, in general, on a scale from 0 to 5, please put a circle around the number which best describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

**FRIENDS AND ACTIVITIES:**

1. **He/she has undesirable friends.**
2. **He/she cannot make friends.**
3. **He/she will not share with others.**
4. **He/she goes to undesirable places.**
5. **Does not go where he/she says.**
6. **Does not tell me who he/she is going with.**
7. **Brings friends over when I am out of the house or without warning.**
8. **He/she puts us on the spot and pressures us.**
9. **He/she plays or stays at home too much.**
10. **He/she brings too many friends home.**
11. **He/she has friends overnight without permission or warning.**
12. **He/she wants to have too many parties.**
13. **He/she has dating or sex problems.**
14. **He/she gets into trouble with the neighbors.**
15. **He/she gets into trouble with the police.**
16. **He/she fights too much with kids.**
17. **He/she is not a good sport.**
18. **He/she wants too many rides.**
19. **Other problems with friends and activities.**
20. **Do you suspect your child/teen of doing anything wrong with his/her friends?**

Regarding FRIENDS AND ACTIVITIES, in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

**CHORES:**

1. **He/she does not do enough chores.**
2. **He/she finds excuses for not doing chores.**
3. **He/she does not do chores on time.**
4. **He/she does chores too slowly.**
5. **He/she does chores too sloppy.**
6. **He/she needs too many reminders about chores.**
7. **He/she does not finish chores.**
8. **He/she complains too much about chores and dislikes them.**
9. **He/she is not helpful (voluntarily does not do extra things).**
10. **He/she is lazy.**
11. **Other chore problems.**

**Regarding CHORES, in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.**

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

**SCHOOL:**

1. He/she gets low grades in school.
2. He/she tries to play sick to avoid going to school.
3. He/she does not get to school on time.
4. He/she cheats to get better grades.
5. He/she does not do homework.
6. He/she wants too much help with homework.
7. He/she does not tell me what happens at school.
8. He/she gets in too many fights in school.
9. He/she starts fights in school, tattles, or blames others.
10. He/she steals in school.
11. Too many complaints from teachers or principal or dislikes teachers.
12. Other school problems.
13. Do you suspect your child/teen of doing anything wrong at school?

Regarding SCHOOL, in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

**APPEARANCE:**

1. He/she is dirty.
2. He/she looks messy.
3. He/she does not bathe enough.
4. He/she does not brush teeth enough.
5. He/she has messy or too long hair.
6. He/she wears the same dirty clothes.
7. He/she changes clothes too often.
8. He/she wears clothes I do not like.
9. Does he/she have any nervous or annoying habits (wets bed), bites fingernails, twitches, sucks thumb, etc...)
10. He/she has health problems.
11. Other appearance problems.

Regarding APPEARANCE, in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

**MONEY:**

1. He/she spends too much money.
2. He/she spends money foolishly.
3. He/she asks me for too much money.
4. Never asks when he/she needs money.
5. He/she does not earn money.
6. He/she does not save money.
7. He/she does not buy clothes or things that are needed.
8. He/she nags me about wanting too many special gifts.
9. Other money problems.
10. Do you suspect your child/teen of doing anything wrong with his/her own money?

Regarding MONEY, in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

**CURFEW:**

1. He/she comes home late from school.
2. He/she comes home late in the evening.
3. Does not tell me where he/she is going.
4. He/she goes out too much.
5. He/she is not dependable about coming home at a reasonable time.
6. Other curfew problems.

Regarding CURFEW, in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

**CONDUCT AND PRIVILEGES:**

1. **He/she disobeys or obeys grudgingly.**
2. **He/she does not follow agreements.**
3. **He/she acts mean, yells, hits or threatens younger brothers or sisters.**
4. **He/she does not ask permission.**
5. **He/she takes me for granted.**
6. **He/she is hard to wake up for school.**
7. **He/she stays up too late at night.**
8. **He/she is late to meals.**
9. **He/she takes too long to eat, eats too much, or too little.**
10. **He/she messes the house and does not put things away.**
11. **He/she gets in the way.**
12. **He/she has to be told things too often or is forgetful.**
13. **He/she breaks things or loses things.**
14. **He/she steals.**
15. **He/she threatens others to get out of trouble.**
16. **He/she cheats or is underhanded.**
17. **He/she snacks too much.**
18. **He/she watches or listens to too much T.V., radio or record player.**
19. **He/she makes too many phone calls.**
20. **He/she smokes.**
21. **He/she uses drugs and/or alcohol.**
22. **Too much play outside.**
23. **Teasing, bullying, quarrelling, bickering, squabbling, annoying, or shows too much anger.**
24. **Loses temper whenever he/she does not get own way.**

(Continued on next page)

25. He/she acts as though they are carrying a chip on their shoulder.

26. He/she does not like where they live.

27. He/she is loud and noisy.

28. He/she blames others.

29. He/she does not do things for him/herself.

30. He/she feels unliked or unloved.

31. I find myself not liking him/her.

32. He/she does not spend time with the family.

33. Other home conduct problems.

34. Do you suspect your child/teen of doing anything wrong at home?

Regarding CONDUCT (at home), in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

NAME_____

DATE_____

## CHILD/TEEN SATISFACTION SCALE

Estimate your current happiness in each of the areas listed. Ask yourself the question, "How happy am I today with how my parent is behaving in this area?" Circle 0 if you are completely happy and see no need for improvement; circle 5 if you are completely unhappy. Numbers in between show more or less need for improvement to make you completely happy.

| | Completely Happy | Very Happy | A little Happy | A little Unhappy | Very Unhappy | Completely Unhappy |
|---|---|---|---|---|---|---|
| COMMUNICATION | 0 | 1 | 2 | 3 | 4 | 5 |
| FRIENDS & ACTIVITIES | 0 | 1 | 2 | 3 | 4 | 5 |
| CURFEW PRIVILEGES | 0 | 1 | 2 | 3 | 4 | 5 |
| HOME CONDUCT & RULES | 0 | 1 | 2 | 3 | 4 | 5 |
| HOME & RECREATIONAL PRIVILEGES | 0 | 1 | 2 | 3 | 4 | 5 |
| HEALTH & APPEARANCE | 0 | 1 | 2 | 3 | 4 | 5 |
| MONEY | 0 | 1 | 2 | 3 | 4 | 5 |
| HOUSEHOLD CHORES | 0 | 1 | 2 | 3 | 4 | 5 |
| SCHOOL | 0 | 1 | 2 | 3 | 4 | 5 |
| OTHER | 0 | 1 | 2 | 3 | 4 | 5 |
| OVERALL HAPPINESS WITH PARENTS | 0 | 1 | 2 | 3 | 4 | 5 |

IGNORE THE REST IF YOU ARE FILLING THIS OUT FOR THE FIRST TIME

| | | | | | | |
|---|---|---|---|---|---|---|
| Following Agreements | 0 | 1 | 2 | 3 | 4 | 5 |
| Discussed Assigned Areas | 0 | 1 | 2 | 3 | 4 | 5 |
| Made New Agreements | 0 | 1 | 2 | 3 | 4 | 5 |

Check if contract was read to each other and and reviewed: _____.

## FAMILY (CHILD/TEEN) PROBLEM CHECKLIST

**List the major problem(s) you have with your parent(s) at home:**

**List the major problem(s) that your parent(s) has with your friends and activities:**

List the major complaint(s) your parent(s) have with your activities at school:

Does your parent(s) make you feel guilty or upset about anything in particular?

**Circle the numbers in front of those problems which you have with your parent(s), and would like to change.**

**COMMUNICATION:**

1. **He/she never greets me or pays attention to me when I am speaking, he/she ignores me.**
2. **He/she does not listen to me.**
3. **He/she is disrespectful.**
4. **He/she criticizes me or disagrees with me about everything.**
5. **He/she talks back or is angry a lot.**
6. **He/she yells.**
7. **He/she swears or uses shocking language.**
8. **He/she lies or cannot be trusted.**
9. **He/she nags or asks me things at the last minute.**
10. **He/she blames others.**
11. **He/she does not discuss problems, accept help, love or praise.**
12. **He/she cries too much.**
13. **He/she makes me feel guilty.**
14. **Other communication problems.**

**Regarding COMMUNICATION, in general, on a scale from 0 to 5, please put a circle around the number which best describes how serious you feel this problem is to you.**

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

**FRIENDS AND ACTIVITIES:**

1. He/she has undesirable friends.
2. He/she cannot make friends.
3. He/she will not share with others.
4. He/she goes to undesirable places.
5. Does not go where he/she says.
6. Does not tell me who he/she is going with.
7. Brings friends over when I am out of the house or without warning.
8. He/she puts us on the spot and pressures us.
9. He/she stays at home too much.
10. He/she brings too many friends home.
11. He/she has friends overnight without warning.
12. He/she wants to have too many parties.
13. He/she has dating or sex problems.
14. He/she gets into trouble with the neighbors.
15. He/she gets into trouble with the police.
16. He/she fights too much with others.
17. He/she is not a good sport.
18. He/she wants too many rides.
19. Other problems with friends and activities.
20. Do you suspect your parent(s) of doing anything wrong with his/her friends?

Regarding FRIENDS AND ACTIVITIES, in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

CHORES:

1. He/she does not do enough chores.
2. He/she finds excuses for not doing chores.
3. He/she does not do chores on time.
4. He/she does chores too slowly.
5. He/she does chores too sloppy.
6. He/she needs too many reminders about chores.
7. He/she does not finish chores.
8. He/she complains too much about chores and dislikes them.
9. He/she is not helpful (voluntarily does not do extra things).
10. He/she is lazy.
11. Other chore problems.

Regarding CHORES, in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

**APPEARANCE:**

1. He/she is dirty.
2. He/she looks messy.
3. He/she does not bathe enough.
4. He/she does not brush teeth enough.
5. He/she has messy or too long hair.
6. He/she wears the same dirty clothes.
7. He/she changes clothes too often.
8. He/she wears clothes I do not like.
9. He/she has nervous or annoying habits (wets bed, bites fingernails, twitches, sucks thumb, smoking, etc.)
10. He/she has health problems.
11. Other appearance problems.

Regarding APPEARANCE, in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

**MONEY:**

1. He/she spends too much money.
2. He/she spends money foolishly.
3. He/she asks me for too much money.
4. Never asks when he/she needs money.
5. He/she does not earn money.
6. He/she does not save money.
7. He/she does not buy clothes or things that are needed.
8. He/she nags me about wanting too many special gifts.
9. Other money problems.
10. Do you suspect your parent of doing anything wrong with his/her own money?

Regarding MONEY, in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

**CURFEW:**

1. He/she comes home late from work.
2. He/she comes home late in the evening.
3. Does not tell me where he/she is going.
4. He/she goes out too much.
5. He/she is not dependable about coming home at a reasonable or an agreeable time.
6. Other curfew problems.

Regarding CURFEW, in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

CONDUCT AND PRIVILEGES:

1. He/she sleeps too much.
2. He/she does not follow agreements.
3. He/she acts mean, yells, hits or threatens me/us.
4. He/she does not ask permission.
5. He/she takes me for granted.
6. He/she is hard to wake up for work.
7. He/she stays up too late at night.
8. He/she is late to meals.
9. He/she takes too long to eat, eats too much, or too little.
10. He/she messes the house and does not put things away.
11. He/she gets in the way.
12. He/she has to be told things too often or is forgetful.
13. He/she breaks things or loses things.
14. He/she steals.
15. He/she threatens others to get out of trouble.
16. He/she cheats or is underhanded.
17. He/she snacks too much.
18. He/she watches or listens to too much T.V., radio or stereo.
19. He/she makes too many phone calls.
20. He/she smokes.
21. He/she uses drugs and/or alcohol.
22. Too much play outside.
23. Teasing, bullying, quarrelling, bickering, squabbling, annoying, or shows too much anger.
24. Loses temper whenever he/she does not get own way.

(Continued on next page)

25. He/she acts as though they are carrying a chip on their shoulder.

26. He/she does not like where they live.

27. He/she is loud and noisy.

28. He/she blames others.

29. He/she does not do things for him/herself.

30. He/she feels unliked, unloved, or unappreciated.

31. I find myself not liking him/her.

32. He/she does not spend time with the family.

33. Other home conduct problems.

34. Do you suspect your parent(s) of doing anything wrong at home?

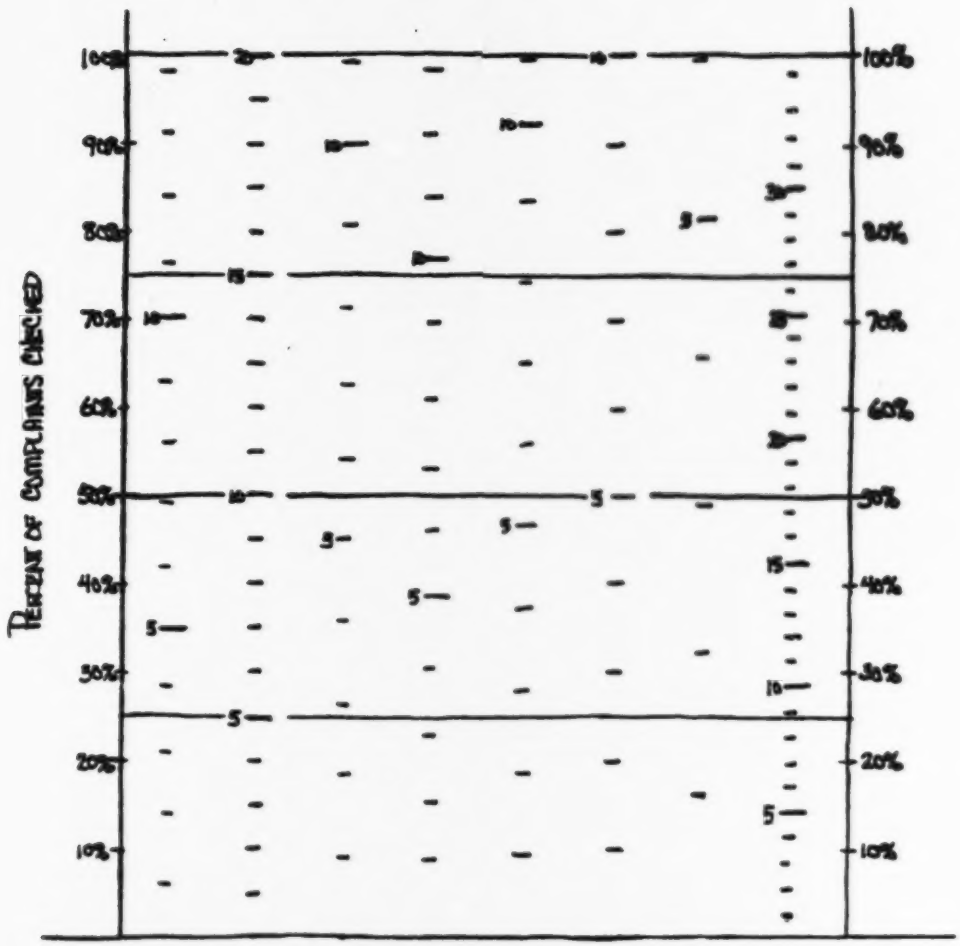
Regarding CONDUCT (at home), in general, on a scale from 0 to 5, please put a circle around the number which describes how serious you feel this problem is to you.

| no problem | very slight problem | slight problem | moderate problem | severe problem | very severe problem |
|---|---|---|---|---|---|
| 0 | 1 | 2 | 3 | 4 | 5 |

Name _____
Encounter # (circle one) 1 2 3 4 5

# COMPLAINT LIST PROFILE

(Penrose, 1986)



# FAMILY PROBLEM CHECK LIST
# CUMULATIVE PERCENTAGE TABLE

(Penrose, 1986)

| NO. ITEMS CHECKED | COM (14) | F/A (20) | CHO (11) | *SCH (13) | APP (11) | MON (10) | CUR (6) | CON (34) | TOTAL PERCENTAGE |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0.07 | 0.05 | 0.09 | 0.08 | 0.09 | 0.10 | 0.17 | 0.03 | 106 = 0.94 ea |
| 2 | 0.14 | 0.10 | 0.18 | 0.15 | 0.18 | 0.20 | 0.33 | 0.06 | 119 = 0.84 ea |
| 3 | 0.21 | 0.15 | 0.27 | 0.23 | 0.27 | 0.30 | 0.50 | 0.09 | |
| 4 | 0.29 | 0.20 | 0.36 | 0.31 | 0.36 | 0.40 | 0.67 | 0.12 | 58 of 106 = 55% |
| 5 | 0.36 | 0.25 | 0.45 | 0.38 | 0.45 | 0.50 | 0.83 | 0.15 | - vs - |
| 6 | 0.43 | 0.30 | 0.55 | 0.46 | 0.55 | 0.60 | 1.00 | 0.18 | 58 of 119 = 49% |
| 7 | 0.50 | 0.35 | 0.64 | 0.54 | 0.64 | 0.70 | | 0.20 | |
| 8 | 0.57 | 0.40 | 0.73 | 0.62 | 0.73 | 0.80 | | 0.23 | |
| 9 | 0.64 | 0.45 | 0.82 | 0.69 | 0.82 | 0.90 | | 0.26 | |
| 10 | 0.71 | 0.50 | 0.91 | 0.77 | 0.91 | 1.00 | | 0.29 | |
| 11 | 0.79 | 0.55 | 1.00 | 0.85 | 1.00 | | | 0.32 | |
| 12 | 0.86 | 0.60 | | 0.92 | | | | 0.35 | |
| 13 | 0.93 | 0.65 | | 1.00 | | | | 0.38 | |
| 14 | 1.00 | 0.70 | | | | | | 0.41 | |
| 15 | | 0.75 | | | | | | 0.44 | |
| 16 | | 0.80 | | | | | | 0.47 | |
| 17 | | 0.85 | | | | | | 0.49 | |
| 18 | | 0.90 | | | | | | 0.52 | |
| 19 | | 0.95 | | | | | | 0.55 | |
| 20 | | 1.00 | | | | | | 0.58 | |
| 21 | | | | | | | | 0.61 | |
| 22 | | | | | | | | 0.64 | |
| 23 | | | | | | | | 0.67 | |
| 24 | | | | | | | | 0.70 | |
| 25 | | | | | | | | 0.73 | |
| 26 | | | | | | | | 0.76 | |
| 27 | | | | | | | | 0.79 | |
| 28 | | | | | | | | 0.82 | |
| 29 | | | | | | | | 0.85 | |
| 30 | | | | | | | | 0.88 | |
| 31 | | | | | | | | 0.91 | |
| 32 | | | | | | | | 0.94 | |
| 33 | | | | | | | | 0.97 | |
| 34 | | | | | | | | 1.00 | |

# APPENDIX B

**RECIPROCITY COUNSELING**

**CASE SUMMARY**

SUBJECT'S NAME: _____ COUNSELOR: _____

REFERRED BY:

DATE(S) OF COUNSELING:

DATE OF REPORT:

FOLLOWING COUNSELING

REASON FOR REFERRAL

GENERAL OBSERVATIONS

EVALUATION

SUMMARY

RECOMMENDATIONS

_____
NAME/RECIPROCITY COUNSELOR

.....

**RECIPROCITY COUNSELING**

**CASE SUPPLEMENT**

SUBJECT'S NAME: _____ COUNSELOR: _____

REFERRED BY:

DATE OF 30-DAY FOLLOW-UP/90-DAY FOLLOW-UP/180-DAY FOLLOW-UP:

DATE OF REPORT:

FOLLOWING FOLLOW-UP

REPORT: SUPPLEMENT TO THE ORIGINAL

INFORMAL OBSERVATIONS

EVALUATION

SUMMARY

RECOMMENDATIONS

_____
NAME/RECIPROCITY COUNSELOR

**RECIPROCITY COUNSELING**

**CASE SUMMARY**

**SUBJECT'S NAME:** Jerome Smith **COUNSELOR:** David Penrose

**REFERRED BY:** S. Bruce (Referee)

**(Or Dates of 30-DAY, 90-DAY, OR 180-DAY FOLLOW-UP:)**
**DATES OF COUNSELING:** March 4, 11, 18, and 25, 1986

**DATE OF REPORT:** March 30, 1986

REASON FOR REFERRAL

Jerome and his mother, Inez Smith, were referred to the Reciprocity Counseling Program by Sally Bruce of Intake. Jerome is involved with the court system because he frequently skips classes, is disobedient to his mother and his teachers, and refuses to obey the reasonable and lawful demands of significant authority figures. Because this is Jerome's first contact with the court, he is a good candidate for counseling. Inez, Jerome's mother, reported a desire to seek counseling and assured Ms. Bruce that both of them would cooperate.

GENERAL OBSERVATIONS

Jerome, a 12-year-old African American, consistently presents a clean and fashionable image. Although he rarely exposes emotions, he revealed that he is capable of sincere laughter and communicating intrinsic regard for others. It appears that, he frequently changes "moods" when he senses the threat of misunderstanding and possible rejection by those closest to him.

Inez, is a 30-year-old African American, is fashion conscious although she does not appear to have the resources to invest in changing styles and provide necessities for Jerome. Inez frequently communicates a willingness to confront the problems in her household. Because there is no

male or father figure present in the home, Inez is forced to expend all of her energies maintaining a lifestyle where all of the basic needs are met.

Jerome and Inez, as a family, frequently exhibit behaviors that indicate a "love-hate" relationship. Inez seems to be the person who gives love - gets hate, whereas Jerome gets love - gives hate. These impressions were first noted at the time of the pre-counseling, in home, interview and reinforced throughout the four sessions of counseling.

EVALUATION

As a result of participating in the four counseling sessions, Jerome and Inez both report a significant reduction of family problems. Before counseling started, Jerome noted sixty-seven (67) specific complaints, the majority of which related to Inez's appearance and conduct. Inez reported seventy-two (72) complaints, the majority of which included Jerome's performance in school, as well as his money spending habits.

Counseling focused on the major complaint areas. Both Jerome and Inez agreed to honestly discuss their complaints in order to help each other improve the living conditions at home. As a result, they made a mutual agreement to initiate motivating behaviors: motivating behaviors are those encouraging the observer to change undesirable habits. During the third counseling session, a reciprocal agreement was made by Jerome and Inez, the agreement included written commitments to work towards 1) improving Jerome's performance in school by increasing mother/son study time; 2) improving Inez's appearance through rechanneling extra money to buy one new dress every month; 3) implementing a money management system and opening a savings account for Jerome; and 4) changing Inez's undesirable habits as a result of increasing mother/son activities and by

reinforcing positive behaviors in order to eliminate bad habits. During the final counseling session, Jerome reported that, "Everyone is keeping their end of the bargain, especially me". Inez reported Jerome's desire to make another agreement. Also significant is the fact that concluding counseling, Jerome reported ten (10) complaints (none regarding Inez's appearance) and Inez reported twenty-three (23) complaints (none of which were related to Jerome's spending habits).

SUMMARY

Jerome and Inez completed the counseling phase of the Reciprocity Counseling program. As a result of the counseling, Jerome reduced his number of complaints by at least 85%, Inez reported a 78% reduction of problems. It can be assumed that counseling was relatively successful and both believe that they are experiencing a significant reduction and/or elimination of problems.

RECOMMENDATIONS

To continue to monitor, by keeping in touch with Jerome and Inez, the maintenance of their reciprocal agreement. The follow-up phase should be implemented and their success to maintain their agreements thereby working to eliminate problems reported in the supplemental case review.

_____

David Penrose, Reciprocity Counselor